FILED May 05, 2003 8:00 am Secretary of State

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

	HII VILM BOOINE		DDK)		05-05-2003 90380 028 ***150.00	
DOCUMENT # P02000108721					03 03 2 003 3 0 30 0 0 20 130.00	
1. Entity Nar					44000	
Principal Plac	ce of Business	Mailing Address			11038744	
8020 W. DRI		8020 W. DRIVE APT 252 NORTH BAY VILLAGE, FL 33	141			:
<u> </u>	Place of Business OWDEIVE		DZNE			
Suite, Apt.	#.86. #376.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES	
City & Stat	- c C a . 1 —1 c c	City & State NOTETAL BAY	VII A	~= . II	4. FEI Number Applied For Not Applicable	
331	Country	T	Country		5. Certificate of Status Desired S8.75 Additional Fee Required	
1001	5. Name and Address of Current F	(l.	7. Name and Address of New Registered Agent	ı
	O. Teams and progress of Sarrows	tegistored Agent	Name		7. Island allo Accided to the Indianal of Agent	
PAZ, RUBE 6905 BAY D			Street A	ddress (P	P.O. Box Number is Not Acceptable)	
MAMI DEA	on, re done		80	210	W. DRIVE, APT IT 376	
	~ /) ,	City	57273	71 BAY VILLAGE FL ZIPSOUS 141	ı
B. The above named entity submits this statement or the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.						
THE CONTINUE OF THE PARTIES ASSETT ASSETTING THE PARTIES ASSETTING						
SIGNATURE Signature, typical or printed number of registered again and title of applicable. (NOTE: Registered Again signature required when reinstating) DATE						
	FILE NOWILL FEE IS \$150.00				1	
Afte	r May 1, 2003 Fee Will be \$550.00 r Payable to Florida Department o	f State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	3
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	_
TITLE	DP	☐ Delete	TITLE	305	Change Addition	CR2E034 (10/02)
NAME STREET ADDRESS	PAZ, RUBEN E 6905 BAY DR. #2		name Street address	TAZ	RUBEN E OW DRIVE, APT# 876	5
CITY-ST-ZP	MIAMI BEACH, FL 33141		CITY-ST-ZIP	1001	PRI RAY WILLIAM EL 33141	9
TITLE	DV	☐ Delete	TITLE	DV	© Change □ Addition	72
NAME	PAZ, JORGE A		NAME	PAZ	JOZGE A.	O
STREET ADDRESS CITY-ST-ZP	6905 BAY DR. #2 MIAMI BEACH, FL 33141		STREET ADDRESS City-St-Zip	8010		
TITLE	IIIAIII BEAOTI, TE GOTAT	☐ Delete	TITLE	NOC	TH BAY VINAGE, FL 3314	
NAME STREET ADDRESS		L_I DEEE	NAME STREET ADDRESS			
CITY-ST-2P -		-	CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS			
City-st-zp		İ	CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	1		NAME STREET ADDRESS	}		
STREET ADDRESS CITY-ST-ZP		÷	CITY-ST-ZIP	į		
1ITLÉ		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	}	_	NAME			
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS City-St-Zip			
12. I hereby certify that the information supplied with this filling ploes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that rily signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appreciate empowered.						
Rustinte						
SIGNATURE: 4430/03,						